



County Borough of Barrow-in-Furness

Annual Report

of the

Medical Officer of Health

I. D. M. NELSON,
M.B., B.Ch., B.A.O., D.P.H.

1956.

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COUNTY BOROUGH OF BARROW-IN-FURNESS
HEALTH DEPARTMENT.

ANNUAL REPORT OF THE
MEDICAL OFFICER OF HEALTH.
1956.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH
COMMITTEE.

Ladies and Gentlemen,

The resignation of Dr. MacLachlan left this Authority without a Medical Officer of Health from September, 1956, until March, 1957, when I replaced him. I am only formally presenting the report, it has been compiled and arranged by Dr. D. G. Stewart, the Deputy Medical Officer of Health and to her goes the credit and responsibility for the observations and facts contained in this introduction and elsewhere.

The form of report naturally follows that adopted in previous years.

Statistically there has been little significant change in Vital Statistics. There was a rise in the Birth Rate from 16.72 in 1955 to 18.00 and a fall in the Death Rate from 14.23 to 13.74. Infant Mortality increased from 31.02 to 33.19 and Maternal Mortality from 0.91 to 1.7 but after correction for inward and outward transfers the figures would be Birth Rate 15.04, Death Rate 12.80, Infant Mortality 28.51 and Maternal Mortality 1.01, which gives a truer picture of conditions in the Borough itself particularly with regard to Infant Mortality and Maternal Mortality, as cases admitted to Risedale Maternity Hospital from County areas are admitted because of complications arising in pregnancy and labour and therefore naturally carry an increased risk to both mother and child.

In the sphere of Infectious Diseases, no epidemics occurred and no case of smallpox, diphtheria, dysentery or poliomyelitis was notified during the year. One case of typhoid and one of para-typhoid were notified during the year ; in the former exhaustive enquiries failed to trace any local source of infection and it appeared almost certain that infection had occurred whilst the patient was on holiday ; in the latter the patient had been admitted prior to confirmation of the diagnosis, to Devonshire Road Hospital from the County area.

On the preventive side, the vaccination with B.C.G. of children found to be susceptible to tubercular infection before leaving school, which was inaugurated in 1955, was carried on all through the year, and the high degree of protection so afforded should result in a steady reduction in the incidence of tuberculosis from year to year. A further noteworthy advance in this field was the introduction of vaccination against poliomyelitis. Registration for the vaccination of the children in the age groups authorised by the Ministry of Health was offered to the public in March and April through the medium of notices in the press, posters and by individual approaches to parents by the Medical Officers, Health Visitors and School Nurses. Owing to the limited supply of vaccine

available, the Ministry of Health had to limit the supply of vaccine to each Local Authority to an amount sufficient to vaccinate only children born in certain months of the selected years, and was carried out in May, June and November. When larger supplies of vaccine are made available in the New Year the remainder will be vaccinated, and as production increases it is hoped that this service will eventually become as readily available as protection against smallpox, diphtheria and whooping cough is now.

There was one innovation in 1956 in the sphere of the Care of Mothers and Young Children ; the Mobile Clinic, staffed by a Health Visitor only, was stationed on Barrow Island every Tuesday morning, and this has proved a welcome addition to the service. The proposed increase of clinics at Risedale Maternity Hospital make it impossible for the Local Authority's Ante-Natal Clinics to continue there so they will be transferred in January to the Central Clinic, Abbey Road, where the decrease in domiciliary midwifery will allow the number of clinics to be reduced from three to two.

The work of the Home Nursing Service continues to increase. A favourable report on this service was received in January from the Queen's Visitor for the North West area, following her visit to Barrow in November, 1955.

In the field of Mental Health, attention was centred on the provision of an Occupation Centre and it is hoped that work on this will be started in 1957.

Major staff changes during the year included the resignation in June of the Medical Officer of Health, Dr. J. MacLachlan, on his appointment as Medical Officer of Health of the County Borough of Sunderland as from 1st October. A new appointment was made in the Dental Department, that of a third Dental Officer. The position of Superintendent Nursing Officer, vacant since February, 1953, was filled in November by the appointment of Miss H. M. White, who will be responsible for the supervision of the Health Visitors, School Nurses and Domestic Helps and the non-medical supervision of Midwives. Miss White will commence her duties in January.

The most disturbing staffing problem is still the shortage of District Public Health Inspectors, only two out of the five established posts being filled, and this in a Section of the Department which is constantly striving to protect the town from infection through the port and safeguards the town by vigilance on environmental hygiene.

In conclusion, thanks are expressed to the Chairman and Members of the Health Committee for their unfailing support and encouragement, and to the whole of the staff of the Health Department for their loyal and willing service throughout the year.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

I. D. M. NELSON,

Medical Officer of Health.

STAFF.

The following assistants were employed on the work of Public Health in the Borough at the end of the year under review :

MEDICAL AND DENTAL

Deputy Medical Officer of Health in charge of Maternity and Child Welfare work and Inspector of Midwives	Dorothy G. Stewart, M.B., Ch.B.
Assistant Medical Officers	Maude W. Smith, M.D. R. Wharton, M.B., Ch.B.
Principal School Dental Officer	D. D. Watts, M.Sc., L.D.S.
Dental Officer	Winifred G. Sivewright, L.D.S.

SANITARY

Chief Public Health Inspector	J. Shanks, Cert.R.S.I. & Joint Board, Cert.R.S.I. (Meat and Food Inspection), Cert.R.S.I. (Smoke Inspection).
Assistant Chief Public Health Inspector	H. C. Perkins, Cert.R.S.I. & Joint Board, Cert.R.S.I. (Meat and Food Inspection).
Abattoirs and Auction Mart Super- intendent	A. A. Kay, Cert.R.S.I. & Joint Board, Cert.R.S.I. (Meat and Food Inspection), Cert.R.S.I. (Smoke Inspection), Cert.R.S.I. (Sanitary Science).
Public Health Inspector for Meat and Food Inspection	W. McLennan, R.S.A. (Scotland), Cert.R.S.I. (Meat and Food Inspection). (Commenced 23-4-56).
District Public Health Inspectors	J. McGarry, Cert.R.S.I. & Joint Board. A. M. S. McEwan, Cert.R.S.A. (Scotland), Cert.R.S.A. (Scotland) Meat Inspection. (Commenced 3-4-56).
Trainee Public Health Inspectors	T. B. Nuttall. G. Woodall. (Commenced 3-9-56).

HEALTH VISITING AND MIDWIFERY

Superintendent Nursing Officer	Vacant.
Health Visitors	Miss E. Cunliffe, S.R.N., S.C.M. Miss M. K. Burns, S.R.N., S.C.M. Mrs. E. M. Tilburn, S.R.N., S.C.M. (Resigned 30-9-56). Miss M. Scott, S.R.N., S.C.M. Miss M. P. Antcliffe, S.R.N., S.C.M. (Resigned 18-2-56). Miss A. W. Cant, S.R.N., S.C.M. Miss D. Latham, S.R.N., S.C.M.

				Miss B. M. Wignall, S.R.N. (Resigned 14-1-56). (Re-commenced 3-12-56).
				Miss S. B. White, S.R.N., S.C.M., S.R.F.N.
				Miss G. Buchanan, S.R.N. (Commenced 3-4-56).
Tuberculosis Health Visitor	....			Miss R. Ward, S.R.N., S.C.M.
Municipal Midwives	....	....	....	Miss A. Bagshaw, S.C.M. Miss G. M. Fytche, S.C.M. Mrs. F. Garstang, S.C.M. Miss T. Potts, S.R.N., S.C.M. Mrs. M. Railton, S.C.M. Miss F. Addison, S.R.N., S.C.M. (Resigned 7-4-56). Miss P. A. Wiper, S.R.N., S.C.M. Miss T. G. Pollard, S.R.N., S.C.M. (Commenced 1-4-56).
HOME NURSING SERVICE				
Superintendent	....	....	....	Miss D. A. Stocks, S.R.N., S.C.M., Q.N.
Assistant Superintendent	....	....		Miss E. M. Jackson, S.R.N., S.C.M., Q.N.
District Nursing Sisters (Full time)	....	....		Miss D. Moscrop, S.R.N., S.C.M., R.F.N., Q.N. Miss J. Lindop, S.R.N. Miss M. B. Langley, S.R.N., S.C.M., Q.N. Mrs. E. Preston, S.R.N. Miss A. T. Goulding, S.R.N. Mrs. M. L. Liddell, S.R.N. Mrs. A. Chester, S.R.N. (Resigned 22-5-56). Mrs. C. T. Watlinge, S.R.N., S.C.M. Miss H. J. Chisholm, S.R.N., S.C.M., Q.N. (Commenced 1-4-56).
PHYSIOTHERAPY				
Physiotherapist	....	....	....	Miss M. Johnson, C.S.P., M.E., L.E.T.
AMBULANCE SERVICE				
Ambulance Officer	....	....	....	J. H. Smethurst.
MENTAL HEALTH SERVICE				
Duly Authorised Officer	....	....		H. Hughes.
Assistant Duly Authorised Officer				R. Rimmer.
ADMINISTRATION				
Chief Clerk	....	....	....	H. Smith.
CLERICAL				
Senior Clerk	....	....	....	K. P. Lees.

GENERAL PUBLIC HEALTH.

INFECTIOUS DISEASES

CORRECTED NOTIFICATIONS FOR 1956

Disease	Male	Female	Total
Scarlet Fever	3	9	12
Whooping Cough	17	17	34
Measles	155	158	313
Pneumonia	9	20	29
Meningococcal Infection	2	2	4
Puerperal Pyrexia	—	2	2
Erysipelas	—	1	1
Food Poisoning	—	2	2
Tuberculosis—respiratory	27	24	51
Tuberculosis—meninges and C.N.S.	—	1	1
Tuberculosis—other	1	2	3
Typhoid Fever	—	1	1
Paratyphoid Fever	—	1	1

Material from suspected infectious cases is examined at the Group Pathological Laboratory, Barrow-in-Furness.

B.C.G. VACCINATION

The scheme amongst school children inaugurated during 1955 was continued throughout the year when a total of 1,041 children were tested and treated as necessary.

POLIOMYELITIS

No case of poliomyelitis occurred within the County Borough during the year.

As referred to in the introduction, anti-polio vaccination was carried out, in the selected groups as authorised by the Ministry, of children whose parents had given their consent in writing for this to be done. The acceptance rate was somewhat disappointing, as out of an estimated eligible population of 9,143 only 789, or 8.9%, acceptances were received.

Owing to the limited supply of vaccine, only 89 cases were completed, a further 6 had one injection, and they and the remainder of the original registrations will be dealt with early in the New Year. It is hoped that when the safety and simplicity of the procedure becomes more widely recognised the public response will increase.

MEASLES

Of the 313 cases notified during the year, approximately 85% of these occurred in the first six months, a continuance of the epidemic prevailing in the last months of 1955.

DYSENTERY

There were no cases of Sonne Dysentery reported during the 12 months ending 31st December.

FOOD POISONING

Two single cases only, of unknown cause, occurred in the last quarter of the year.

BARROW-IN-FURNESS SHELLFISH ORDER, 1947

This Order, imposing absolute prohibition on the taking of all kinds of shellfish for sale for human consumption from the whole of the Walney Channel in the Borough was varied in December by the Minister of Health on appeal from the Lancashire and Western Sea Fisheries Joint Committee, so as to allow periwinkles to be taken from the Foulney Twist and West Side of Piel Channel.

PUBLIC CLEANSING UNIT

This Unit was used on 21 separate occasions as follows :—

Ambulance Service (Blankets)....	....	6
Persons, Clothing and Bedding	....	12
Persons and Clothing	....	1
Personal Bedding	....	2

VERMINOUS CONDITIONS.

The facilities provided for the School Health Service are extended to children of pre-school age, a proportion of the cost being borne by the Health Committee.

The main conditions dealt with are scabies, head lice and ringworm, and these receive treatment at the Central Clinic. Stubborn cases are referred to the Skin Department at North Lonsdale Hospital.

Adults are given advice and materials to cleanse themselves and in difficult cases are admitted to hospital.

WATER.

There has been no change in the source of water supply since last year and the quantity and quality has remained satisfactory. Bacteriological and chemical control is maintained by the Water Department. The plumbo solvent action of the water is corrected by the addition of lime to give a pH value of approximately 9.0.

A scheme to safeguard the gathering grounds has been prepared.

Some 20,432 dwelling houses comprising the majority of the population are supplied direct from the public mains ; there are no standpipes.

PORT HEALTH SURVEY, 1956

SECTION I—STAFF.

TABLE A.

Name of Officer	Nature of appointment	Date of appointment	Qualifications	Any other appointments held
Dr. James Maclachlan	Medical Officer of Health	7/3/52	M.B., Ch.B., D.P.H. (Resigned 30/9/56)	
Dr. Dorothy G. Stewart	Deputy Medical Officer of Health	5/10/48	M.B., Ch.B.	
John Shanks	Port Health Officer	1/4/42	Cert.R.S.I. & S.I.) Joint Board, etc.	Chief Public Health Inspector.
Herbert C. Perkins	Port Health Officer	1/7/52	Cert.R.S.I. & S.I. Joint Board, etc.	Assistant Chief Public Health Inspector

Address and telephone number of the Medical Officer of Health—Town Hall, Barrow-in-Furness. Telephone No. : Barrow 600.

SECTION II—AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR.

TABLE B.

Ships from	Number	Tonnage	Number inspected		Number of Ships reported as having, or having had during the voyage, infectious disease on board
			By the Medical Officer of Health	By the Public Health Inspector	
Foreign Ports....	223	479,336	Nil.	179	Nil.
Coastwise	315	86,601	Nil.	73	Nil.
Total	538	565,937	Nil.	252	Nil.

SECTION III—CHARACTER OF SHIPPING AND TRADE DURING THE YEAR.

TABLE C.

PASSENGER TRAFFIC	{	Number of passengers INWARDS—29. Number of passengers OUTWARDS—19.
CARGO TRAFFIC	{	Principal IMPORTS—Iron Ore, Wood Pulp, Pulp Wood, and Scrap Metal. Principal EXPORTS—Coke, Pig Iron and Ingot Moulds.

PRINCIPAL PORTS from which ships arrive—Bona, Melilla, Almeria, Algiers, Hornillo, Narvik, Helsingborg, Oxelosund, Ymuiden, Oskarhamn, Hamburg, Lulea, Gefle, Kirkines, Rouen, Setubal, Ayr, Heysham, Liverpool, Belfast and the Republic of Ireland.

SECTION IV—INLAND BARGE TRAFFIC.

There is no inland barge traffic within the district.

SECTION V—WATER SUPPLY.

- (1) Source of supply for (a) the district—Upland surface source.
(b) The town's water supply is available at the dock side and is used for shipping.
- (2) Reports of tests for contamination—Nil.
- (3) Precautions taken against contamination of hydrants and hosepipes—Hydrants and hosepipes are protected and stored in a water shed when not in actual use.
- (4) There are no water boats in use at the Port.

SECTION VI—PUBLIC HEALTH (SHIPS) REGULATIONS, 1952

- (1) LIST OF INFECTED AREAS. (Regulation 6).
A list of Infected Areas is prepared and amended by the Medical Officer of Health from the official list of Infected Areas. A typewritten list of Infected Areas is prepared from the official list of Infected Areas and is delivered by hand to H.M. Customs and Excise Officers,
- (2) RADIO MESSAGES.
Arrangements have been made with Seaforth Radio Station and the Post Office Telephones to send and receive messages from ships entering the Port.
- (3) NOTIFICATIONS OTHERWISE THAN BY RADIO. (Regulation 14(1) (b)).
Telephonic communication from Shipping Agents.
- (4) MOORING STATIONS. (Regulations 22 to 30).
Within Docks: An inner mooring station near Buccleuch Bridge within the Ramsden Dock has been established as a mooring station for all unhealthy ships arriving at Barrow. On arrival of an infected ship or a suspect ship, the vessel is taken to the designated mooring station.
- (5) ARRANGEMENTS FOR—
 - (a) Hospital accommodation for infectious diseases (other than smallpox).
Arrangements have been made to receive seamen suffering from infectious disease to be admitted to Devonshire Road Isolation Hospital.
 - (b) Surveillance and follow up of contacts.
The surveillance and follow up of contacts is carried out by the Medical Officer of Health and the Public Health Inspectors.
 - (c) Cleansing and disinfection of ships, persons, clothing and other articles.

In cases of necessity the arrangements for the cleansing and disinfection of ships is carried out under the supervision of the Port Health Officers, and cases requiring isolation would be found accommodation at the Devonshire Road Isolation Hospital.

SECTION VII—SMALLPOX.

- (1) Name of Isolation Hospitals to which smallpox cases are sent from the district.
 Elswick Leys Smallpox Hospital, Blackpool.
 Ainsworth Smallpox Hospital, Bury.
- (2) Arrangements have been made to remove all such cases by Corporation ambulances to the hospital. Members of the ambulance crew have been vaccinated recently.
- (3) Name of smallpox consultant available.
 Dr. R. W. Farquar, Victoria House, Regent Street, Lancaster.
- (4) There are no facilities available locally for the laboratory diagnosis of smallpox.

SECTION VIII—VENEREAL DISEASE.

A local centre exists at the Devonshire Road Isolation Hospital for the diagnosis and treatment of Venereal Disease. Information as to the location, days and hours of the available facilities is supplied by notice to the Master or other responsible Officer on a vessel's arrival. The times of the Clinic are as follows :—Monday 7-0 p.m., Wednesday 10-30 a.m.

SECTION IX—CASES ON NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS.

TABLE D.

Category	Disease	Number of cases during the year		Number of ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	Nil.	Nil.	Nil.	Nil.
Cases which have occurred on ships from foreign ports but have been disposed of before arrival	Nil.	Nil.	Nil.	Nil.
Cases landed from other ships	Nil.	Nil.	Nil.	Nil.

SECTION X—OBSERVATIONS OF THE OCCURRENCE OF MALARIA IN SHIPS.

There have been no reported cases of Malaria entering the Port during the year.

SECTION XI—MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE.

No vessels arrived at the Port either plague infected or plague suspected.
 No vessels from plague infected Ports arrived during the year.

SECTION XII—MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS.

All vessels from foreign ports entering the Port are, where necessary, systematically inspected by the Port Health Officers to ascertain the degree of rodent infestation on board.

A macroscopic examination of rats caught is carried out at frequent intervals by the Medical Officer and the Port Health Officers. There were no rats sent for bacteriological examination during the year.

Arrangements have been made, when necessary, for the deratting of ships by means of Hydrogen Cyanide to be carried out by a commercial contractor, Messrs. Hivey Fumigation Co., Ltd., 15, Cheapside, Liverpool.

It has not been found necessary to carry out any rat-proofing of ships during the year.

TABLE E.

Rodents destroyed during the year in ships from foreign ports.

Category	Number
Black rats	6
Brown rats	Nil.
Species not known	Nil.
Sent for examination	Nil.
Infected with plague	Nil.

TABLE F.

DERATTING CERTIFICATES AND DERATTING EXEMPTION CERTIFICATES ISSUED DURING THE YEAR FOR SHIPS FROM FOREIGN PORTS.

No. of Deratting Certificates issued				Number of Deratting Exemption Certificates issued	Total Certificates Issued
After fumigation with		After trapping	After poisoning	Total	
HCN	Other fumigant				
Nil.	Nil.	Nil.	Nil.	Nil.	36
					36

12 of the above-mentioned Deratting Exemption Certificates were issued following examinations of vessels at the Port of Heysham.

As from 1st October, 1952, the Port was included in the list of ports where the Medical Officer of Health is authorised to issue Deratting Certificates and Deratting Exemption Certificates.

SECTION XIII—INSPECTIONS OF SHIPS FOR NUISANCES
TABLE G.

INSPECTIONS AND NOTICES.

Nature and Number of Inspections		Notices served		Result of serving Notices
		Statutory Notices	Other Notices	
Routine Inspections and Re-Inspection....	293	Nil.	25 written informal Notices. 17 verbal Notices to Master or Chief Officer.	All the nuisances have so far as practicable been abated, prior to the vessels leaving the Port.
Total	293	Nil.	42	....

SECTION XIV—PUBLIC HEALTH (SHELL-FISH) REGULATIONS, 1934 AND 1948

The gathering of Cockles and Mussels from Walney Channel is prohibited by an Order made in 1918, and the gathering of Periwinkles is prohibited by an Order made in 1946.

SECTION XVI—MISCELLANEOUS.

There are no special arrangements for the interment of dead arriving by sea. The body is first examined by the Medical Officer of Health.

PREVENTION OF DAMAGE BY PESTS (APPLICATION TO SHIPPING) ORDER, 1951.

Two Rodent Control Certificates were issued under the provisions of the above-mentioned Order during the year.

FOOD INSPECTION.

No foodstuffs arrived at the Port during the year, therefore no action was taken under the Public Health (Imported Food) Regulations, 1937 and 1948, the Public Health (Imported Milk) Regulations, 1926, and the Public Health (Preservatives, etc., in Food) Regulations, 1925-1940.

ARRANGEMENTS FOR DEALING WITH MARITIME DECLARATIONS OF HEALTH.

A blank Maritime Declaration of Health form is handed to the Master of every ship approaching the Port as soon as the Pilot boards. On arrival at the Port the completed form is inspected by the Customs Officer or Port Health Officer, whoever is first aboard.

BOARDING OF VESSELS ON ARRIVAL.

Vessels arriving from infected or suspected ports are always boarded by a Customs Officer and Port Health Officer together. Other vessels are usually boarded by a Customs Officer in the first instance.

RESTRICTION ON BOARDING OR LEAVING SHIPS.

Instructions have been given to the Harbour Authorities, tradespeople and other persons in the habit of visiting ships at the Port to keep clear until the ship is free from control.

ENVIRONMENTAL HEALTH.

The following is a summary, prepared by the Chief Public Health Inspector, of the work carried out in his Department during the year 1956 :—

HOUSING.

Housing Repairs :

INFORMAL ACTION.

Number of unfit or defective houses rendered fit during the year as a result of informal action under the Public Health or Housing Acts....	137
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ACTION UNDER STATUTORY POWERS.

Public Health Act :

Number of houses in which defects were remedied after service of formal notices :

(a) by owners	176
(b) by the local authority in default of owners	5

Housing Act, 1936 (Section 9) :

Number of unfit houses rendered fit for human habitation after service of formal notices :

(a) by owners	4
(b) by the local authority in default of owners	2

DEMOLITION ORDERS.

Housing Act, 1936 (Section 11) :

13 Demolition Orders were made in respect of 13 unfit dwellings.

The owners of 5 of these dwellings lodged Appeals against the Orders in the County Court, but subsequently withdrew two of the Appeals. The County Court Judge rejected the 3 Appeals which were proceeded with.

In the case of a further unfit dwelling in respect of which a Notice under Section 11 was served on the owner, the local authority accepted an undertaking to render the house fit for human habitation.

CLOSING ORDERS.

Housing Act, 1936 (Section 12) :

Number of Closing Orders made in respect of unfit dwellings	2
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CLEARANCE ORDERS.

Housing Act, 1936 (Section 25) :

During the year, 3 Clearance Orders were made in respect of 3 Clearance Areas comprising a total of 14 houses.

HOUSING REPAIRS AND RENTS ACT, 1954

This Act came into operation on the 30th August, 1954, and enables landlords of controlled houses to claim a rent increase provided that certain conditions are fulfilled. In short, these conditions are : (1) A Notice in a prescribed form (vide Housing Repairs (Increase of Rent) Regulations, 1954), must be served on the tenant ; (2) the owner must declare in writing that the house is in good repair and fit for human habitation ; and (3) a declaration in writing that work of general repair has been carried out to the dwelling in 12 months out of the last 14 months before the date of the Notice, to the value of not less than three times the amount of the statutory repairs deduction, or an amount to the value of six times the statutory repairs deduction during three out of the last four years ending on the 30th December, 1954.

In the declaration on expenditure, the landlord must give a general description of the work carried out, its value and the period when it was done, so that the tenant can, if he wishes, challenge it in the County Court within 28 days of the date of the Notice of Increase. The landlord has also to set out in the Notice the existing recoverable rent, and show how the repairs increase is calculated, the gross value of the house, and specify the date, which must be at least 6 weeks after the date of the Notice, when the increased rent is payable.

If the condition of the house is in dispute, the tenant can apply to the local authority for a Certificate of Disrepair. This application can be made as soon as the Notice of Increase is received, or at any later time if the condition of the house warrants it. Furthermore if the house was a controlled one on the 1st September, 1939, and the tenant has been paying the 40% increase permitted under the Rent Act of 1920, it would seem that he can, if he obtains a Certificate of Disrepair, deduct this amount from his rent besides refusing to pay the increase permitted under the new Act.

When the landlord puts the house in good repair, he can apply to the local authority to revoke the Certificate of Disrepair, and if they do so, the repairs increase becomes payable.

On receipt of an application for a Certificate of Disrepair, the house is inspected by a Public Health Inspector. The scope of this inspection is largely controlled by the form of certificate which is prescribed in the Housing Repairs (Increase of Rent) Regulation, 1954.

Following the said inspection, the Chief Public Health Inspector submits a report thereon to the Housing Committee, who decide whether or not to grant a Certificate. Similar action is taken in respect of an application for revocation of a Certificate of Disrepair.

The following statistics summarise the administration of the above provisions during 1956 :—

No. of applications for Certificates of Disrepair	14
No. of applications considered and granted by the Housing Committee	14
No. of applications refused	Nil.
No. of applications for Revocation of Certificates of Disrepair	25
No. of Certificates revoked	20
No. of applications for revocation refused	5
No. of inspections carried out in connection with these provisions	193

ABATEMENT OF NUISANCES.

No. of complaints regarding nuisances and sanitary defects received and investigated	791
No. of inspections and re-inspections made under the provisions of the Public Health & Housing Acts	5091
No. of Intimation Notices served in connection with Nuisances and Sanitary Defects	373
No. of Statutory Notices served in connection with Nuisances and Sanitary Defects	266
No. of Orders obtained in the Magistrates' Court in respect of Unabated Nuisances	3

No. of inspections of Cinemas, Theatres and Music Halls	....	....	....	51
No. of miscellaneous inspections (Piggeries, Stables, etc.)	....	....	....	211
No. of interviews with owners, agents and Contractors, etc.	....	....	....	623
No. of observations and inspections re. atmospheric pollution	....	....	....	95

The following is a summary of work carried out during the year as a result of formal action, and in addition to a considerable amount of work effected as a result of informal action :—

WATER CLOSETS, FLUSHING APPARATUS, ETC.

No. of W.C. roofs repaired	....	....	....	....	....	....	....	....	....	30
No. of W.C. doors repaired or renewed	....	....	....	....	....	....	....	....	....	34
No. of W.C. floors repaired or renewed	....	....	....	....	....	....	....	....	....	1
No. of W.C. cisterns repaired or renewed	....	....	....	....	....	....	....	....	....	15
No. of W.C. flushing apparatus repaired or renewed	....	....	....	....	....	....	....	....	....	39
No. of W.C. flushing apparatus provided with a proper supply of water										16
No. of broken pedestal W.C. basins repaired or renewed	....	....	....							16
No. of W.C. conversions	....	....	....	....	....	....	....	....	....	9
No. of W.C. seats repaired or renewed	....	....	....	....	....	....	....	....	....	23
No. of defective W.C. walls repaired or rebuilt	....	....	....	....	....	....	....	....	....	28
No. of defective connections between W.C. basin & flushpipe	....	....	....							6

EAVES GUTTERS, RAINWATER PIPES, HOPPER HEADS, ETC.

No. of premises on which eaves gutters were cleared, repaired or renewed	75
No. of premises on which rainwater pipes were repaired or renewed	65
No. of defective lead valley gutters repaired or renewed	1
No. of yard gulleys unstopped	3
No. of broken gulleys renewed	2
No. of gratings provided to gulleys	14

DRAINAGE AND YARD PAVING, ETC.

No. of stopped drains cleared and repaired	....	....	....	....	....	....	20
No. of defective drains repaired or relaid	....	....	....	....	....	....	20
No. of defective drain vent shafts repaired or renewed	....	....	....	....	....	....	18
No. of defective yard surfaces repaired or renewed	....	....	....	....	....	....	54
No. of broken and defective sink waste pipes repaired or renewed	....	....	....	....	....	....	22
No. of broken and defective bath waste pipes repaired or renewed	....	....	....	....	....	....	3
No. of W.C. soil pipes repaired or renewed	....	....	....	....	....	....	4
No. of cases of cellar flooding remedied	....	....	....	....	....	....	1

YARD WALLS, YARD DOORS, ETC.

No. of defective yard doors repaired or renewed	....	....	....	....	....	48
No. of defective yard walls repaired or renewed	....	....	....	....	....	63

GENERAL REPAIRS AND RENEWALS TO DWELLING-HOUSES.

No. of roofs repaired	77
No. of floors repaired and renewed	211
No. of cases of dampness in walls remedied	231
No. of cases of defective plasterwork of walls repaired or renewed	241
No. of defective house walls repaired or rebuilt	94
No. of cases of defective plasterwork of ceilings repaired or renewed	118
No. of defective doors repaired or renewed	73
No. of defective kitchen firegrates repaired or renewed	11
No. of defective parlour firegrates repaired or renewed	18
No. of defective bedroom firegrates repaired or renewed	10
No. of defective chimney stacks repaired or rebuilt	33
No. of defective chimney flues repaired or reconstructed	8
No. of defective flashings repaired or renewed	11
No. of defective washing boilers repaired or renewed	4
No. of defective cement renderings to external walls repaired or renewed	18
No. of defective skylights repaired or renewed	2
No. of defective fanlights repaired or renewed	1
No. of defective sinks renewed or refixed	44
No. of vent bricks provided to walls	4
No. of loose handrails to staircases refixed	6
No. of defective fixed cupboards repaired or renewed	2
No. of defective firegrate surrounds and hearths repaired or renewed	28
No. of defective firebacks to kitchen ranges repaired	17
No. of defective window frames repaired or renewed	221
No. of defective window sills repaired or renewed	195
No. of defective window sashes repaired or renewed	104
No. of cases of defective window glazing, putty-pointing etc., remedied	42
No. of cases of defective pointing to window and door reveals	69
No. of defective window cords remedied	142
No. of leaking bay window top repaired	5
No. of rooms in which skirting boards were provided or repaired	19
No. of broken and dangerous steps repaired or renewed	20
No. of defective mantelpieces repaired or renewed	1
No. of water storage cisterns repaired or renewed	4
No. of defective staircases reconstructed or repaired	7
No. of defective weatherboards & threshwoods provided or repaired	54
No. of cases of defective pointing remedied	189
No. of defective pipes and taps repaired	20
No. of coalstore, outhouse, etc., structural repairs	12
No. of cases of repair or renewal of leaking gas pipes and fittings	3

OTHER MATTERS DEALT WITH

No. of filthy, unwholesome or verminous premises cleared or disinfested	6
No. of accumulations of offensive refuse removed	8
No. of dirty and insanitary areas to buildings cleansed	3
No. of food stores provided with means of ventilation	6
No. of habitable rooms provided with means of permanent ventilation	21
No. of miscellaneous nuisances abated	5

DISINFESTATION

During the year, the department carried out disinfestation measures in connection with a variety of infestations, including bugs, fleas, beetles, ants, etc., at 18 privately owned premises, and 15 Corporation owned premises.

WATER SUPPLY TO OCCUPIED DWELLING-HOUSES.

No. of Statutory Notices served under the provisions of Section 138 of the Public Health Act, 1936, and Section 30 of the Water Act, 1945, requiring the provision of a sufficient supply of wholesome water to dwelling-houses	....	....	....	....	....	....	....	....	11
No. of dwelling-houses provided with a sufficient supply of water	....	....	....	....	....	....	....	....	15
No. of leaking pipes repaired	....	....	....	....	....	....	....	....	7

DRAINAGE WORK.

The provisions of Section 41 of the Public Health Act, 1936, regarding the notification to be given to the Local Authority of the repair, reconstruction or alteration of the course of any underground drain, are enforced by the Public Health Inspector's Department, and all such work is inspected and approved by the Public Health Inspectors before being covered in.

No. of inspections and tests carried out in connection with the repair of, alteration to, or addition to, drains	429
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SHOPS ACT, 1950.

No. of inspections carried out under the provisions of the Shops Act, 1950	258
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The provisions were generally well complied with.

CONTROL OF MOVEABLE DWELLINGS.

During the year considerable time was devoted to the inspection of tents, sheds, etc., used for human habitation.

There is one licensed site within the County Borough area.

During the year, 9 temporary structures used as dwellings, and consisting, in the main of converted caravans and sheds, situated at Biggar Bank, Walney, were represented to the Council as being unfit for human habitation. Demolition Orders were made by the Council in each case. The owner of 3 of the said structures lodged appeals to the County Court, but subsequently withdrew the appeal in respect of 1 structure. The County Court Judge rejected the Appeals. A further appeal was lodged by the owner/occupier of another of the condemned structures, but this appeal was subsequently withdrawn.

RODENT CONTROL.

The Council employ two Rodent Control Operatives to deal with rat and mouse infestation. The work is carried out free of charge, with the exception that occupiers of business premises, factories and work-places are required to pay for the cost of materials and labour.

Rodent Control work in respect of the sewers is the responsibility of the Borough Engineer and Surveyor.

During the course of sewer-baiting, the Rodent Control staff carried out systematic inspections of properties adjacent to the sewers undergoing treatment and it was found that the sewer work had a very marked beneficial effect upon the infestations discovered in surface properties.

Many surface infestations have been remedied throughout the Borough by means of the repair or reconstruction of defective drainage systems

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

The above-mentioned Act which came into force on the 31st March, 1950, revoked the Rats and Mice (Destruction) Act, 1919. The Act places the onus on Local Authorities to take such steps as may be necessary to secure as far as practicable that their Districts are kept free from rats and mice, and in particular to carry out inspections from time to time, to destroy rats and mice on land occupied by Local Authorities, and to enforce the duties of owners and occupiers of land regarding rodent infestation. Occupiers of land infested by substantial numbers of rats or mice are legally bound to notify the local authority thereof in writing. The Act places the onus of disinfection of land upon the owner or occupier thereof and provides for the service of notice upon the owner or occupier by the Local Authority, requiring him to take specific action within a specified time for the eradication of rats and mice, and empowers the Local Authority to carry out such work in default, and to recover the cost thereof from the said owner or occupier.

The following is a summary of the work carried out under the provisions of the Act during 1956.

	Type of Property				
	Local Authority (1)	Dwell- ing Houses (2)	Agri- cultural (3)	All other (including business premises) (4)	Total (5)
Number of properties inspected by the Local Authority as a result of (a) notification (b) survey under the Prevention of Damage by Pests Act, 1949 (c) otherwise e.g. when visited primarily for some other purpose.	(a) 17	174	2	54	247
	(b) 22	113	39	78	252
	(c) 35	297	6	455	793
Total inspections carried out including re-inspections.	134	695	79	672	1580
Number of properties inspected which were found to be infested by rats.	Major 3	8	—	6	17
	Minor 7	88	3	19	117
Number of properties inspected which were found to be infested by mice.	Major 2	4	—	9	15
	Minor 5	94	6	20	125
Number of infested properties created by the Local Authority.	17	194	—	54	265
Number of "block" control schemes carried out.					22

INFECTIOUS DISEASES.

No. of visits of enquiry and inspection re cases of Infectious Disease 31
Disinfection of premises and effects was carried out where necessary.

PHARMACY AND POISONS ACT, 1933.

No. of visits of inspections in relation to applications of persons for the retention of their names in the Authority's List of persons entitled to sell poisons included in Part II of the Poisons List	29
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FERTILISERS AND FEEDING STUFFS ACT, 1926

FEEDING STUFFS

During the year, 6 Formal Samples of Feeding Stuffs were taken, and were reported by the Analyst to be satisfactory and to comply with the respective guarantees.

MILK SUPPLY.

No. of visits paid to Dairies, Milk Shops and Milk Pasteurising Depots	195
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THE MILK AND DAIRIES REGULATIONS, 1949-1954.

The execution and enforcement of the regulations on dairy farms (except in so far as they relate to diseases Communicable to Man) became from 1st October, 1949, the responsibility of the said Minister, while Local Authorities retain responsibility for those provisions which apply outside dairy farms, for the provisions relating to diseases Communicable to Man, for the registration of dairies other than dairy farms, and for the registration of dairymen and distributors of Milk.

No. of Dairies registered during the year	Nil.
No. of Distributors of Milk Registered during the year	22

THE MILK (SPECIAL DESIGNATIONS) (RAW MILK) REGULATIONS, 1949.

THE MILK (SPECIAL DESIGNATIONS) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949.

These Regulations re-enact with amendments the provisions of the Milk (Special Designations) Regulations, 1936 to 1948.

The Milk (Special Designations) (Raw Milk) Regulations, 1949, provide that Licences to producers to use any special designation shall be granted by the Minister of Agriculture and Fisheries, while Local Authorities will continue to grant Licences to dealers to use special designations in respect of milk sold by them.

The Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations, 1949, provide for a new special designation "Sterilised Milk." Licences in respect of Pasteurising and Sterilising establishments will be issued by the Food and Drugs Authorities, and Local Authorities will continue to be responsible for all other Licences connected with these designated milks.

All fees for Licences have been dispensed with under the provisions of the above-mentioned Regulations.

BACTERIOLOGICAL EXAMINATION OF MILK SAMPLES.

PASTEURISED MILK.

No. of samples taken	52
No. satisfactory in all respects	52
No. of Licensed Milk Pasteurisers in the Borough :—	
H.T.S.T.	2

TUBERCULIN-TESTED (PASTEURISED) MILK.

No. of samples taken	21
No. satisfactory in all respects	21
No. of Licensed Pasteurisers of Tuberculin-Tested Milk in the Borough :—	
H.T.S.T. Process	1

TUBERCULIN-TESTED MILK (PRODUCED WITHIN THE BOROUGH)

No. of samples taken	10
No. satisfactory on both Methylene Blue and Coliform Tests	6
No. unsatisfactory on Methylene Blue Test	1
No. unsatisfactory on Coliform Test	3

TUBERCULIN-TESTED MILK (PRODUCED OUTSIDE THE BOROUGH).

No. of samples taken	32
No. satisfactory on both Methylene Blue and Coliform Tests	18
No. unsatisfactory on Methylene Blue Test	6
No. unsatisfactory on Coliform Test	13

UNDESIGNATED MILK (PRODUCED OUTSIDE THE BOROUGH).

No. of samples taken	3
No. satisfactory in all respects	Nil.
No. unsatisfactory on Plate Count Test	2
No. unsatisfactory on Methylene Blue Test	1
No. unsatisfactory on Coliform Test	3

BIOLOGICAL EXAMINATION OF MILK SAMPLES.

Total No. of bulk samples of Milk submitted for animal inoculation test	40
Total No. of bulk samples of Milk showing the presence of B. Tuberculosis	Nil.

THE ICE-CREAM (HEAT TREATMENT, ETC.) REGULATIONS 1947 to 1952.

The administration of these Regulations was fully carried out and repeated visits of inspection to premises where ice-cream is manufactured and/or sold showed that, following advice and explanation given by the Inspectors, the provisions were being well complied with.

No. of inspections of premises where Ice-Cream is manufactured and/or sold	215
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BACTERIOLOGICAL EXAMINATION OF ICE-CREAM

During the year, samples of Ice-Cream were obtained from the various premises registered for its manufacture and/or sale, and were submitted to the Methylene Blue Test recommended by the Ministry of Health. Details of the samples and the results of the tests are as follows :—

No. of samples of Ice-Cream submitted	6
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The results of the tests show that the samples were classified as follows :—

Grade 1 6 samples

In addition, the results of the Coliform Test showed that B. Coli was absent in each of the samples.

THE FOOD AND DRUGS ACT, 1955.

THE FOOD HYGIENE REGULATIONS, 1955-56.

The new and amended provisions contained in the 1955 Act and the provisions of the new Regulations were promptly implemented. Numerous invitations to address Trade Associations and groups of traders and Womens' Organisations were readily accepted by the Chief Public Health Inspector, and very keen interest was displayed in the new provisions at numerous meetings held.

During the year, routine visits of inspection were carried out regularly of all types of food premises including shops, food factories and warehouses, restaurant and hotel kitchens, canteens, ice-cream manufacturers' and dealers' premises, butchers' shops, market stalls and the Cold Stores. Inspections were also carried out of vehicles used for the transport of meat and other foodstuffs.

The following is a summary of the inspections carried out and action taken in connection with food premises.

No. of premises registered during the year under Section 16 in connection with the preparation or manufacture of sausages, or potted, pressed, pickled or preserved food	Nil.
Total No. of such premises on the register	116
No. of premises registered during the year in connection with the manufacture or sale of Ice-Cream	19
Total No. of such premises on the register	231
No. of inspections of registered food premises	354
No. of inspections of other food premises	988

Special attention was paid to personal hygiene in respect of persons engaged in food handling and preparation, and in this connection a high standard has been maintained.

The following is a summary of the repair and improvement work carried out at numerous food premises following inspection during the year :—

Wash hand basins provided	72
Sinks provided	24
Hot Water provided	31
Nailbrushes provided	40
Handwashing notices provided	45
Preparing table tops covered with impervious material	97
New preparing tables provided	10
New chopping blocks provided	6
Covered food containers provided	15
Refrigerators provided	29
Premises redecorated	52
Clothing lockers and accommodation provided	12
First Aid Outfits provided	7
Flooring repaired, or renewed	14
Miscellaneous improvements	23
W.C. compartments repaired	4
W.C. compartments redecorated	15
Additional W.C. accommodation provided	3
W.C. basins renewed	2
W.C. cisterns repaired, or renewed	3

PUBLIC HEALTH (MEAT) REGULATIONS, 1924

No. of inspections of butchers' shops, meat stalls and the Cold Stores 420

The Regulations continue to be well complied with generally, and only informal action was necessary where any default was found.

The provisions of the Regulations in regard to the transport of meat have been carried out satisfactorily, and several firms have provided new specially constructed vehicles for the transport of meat.

MEAT INSPECTION.

NUMBERS OF ANIMALS SLAUGHTERED AT THE PUBLIC ABATTOIRS.

Year.	Cattle.	Calves.	Sheep.	Pigs.	Total.
1954	4742	2299	25285	7858	40184
1955	5286	979	21066	9296	36627
1956	5685	1427	22628	8323	38063
Increase	399	448	1562	—	—
Decrease	—	—	—	973	1436

NUMBER OF WHOLE CARCASSES WITH OFFALS CONDEMNED.

Year.	Beef	Veal	Mutton	Pork	Total.
1954	103	164	91	54	412
1955	75	42	91	37	245
1956	47	23	49	22	141
Increase	—	—	—	—	—
Decrease	28	19	42	15	104

The total weight of meat condemned at the Abattoirs during the year was :—39 tons, 16 cwt, 3 qtrs, 14 lbs.

UN SOUND MEAT : CARCASSES AND PART CARCASSES CONDEMNED AT THE ABATTOIRS.

Disease	Beef lbs.	Veal lbs.	Mutton lbs.	Pork lbs.	Total. lbs.
Tuberculosis	700	—	—	1448	2148
Other Conditions	18730	775	1967	1108	22580
	<u>19430</u>	<u>775</u>	<u>1967</u>	<u>2556</u>	<u>24728</u>

UN SOUND VISCERA CONDEMNED AT THE ABATTOIRS.

Disease	Beef lbs.	Veal lbs.	Mutton lbs.	Pork lbs.	Total lbs.
Tuberculosis	1460	—	—	2701	4161
Other Conditions	45908	133	9114	5006	60161
	<u>47368</u>	<u>133</u>	<u>9114</u>	<u>7707</u>	<u>64322</u>

	Cattle	Calves	Sheep and Lambs	Pigs
Number killed	5,685	1,427	22,628	8,323
Number inspected	5,685	1,427	22,628	8,323
ALL DISEASES EXCEPT TUBERCULOSIS				
Whole carcasses condemned	46	23	49	9
Carcases of which some organ or part was condemned	4,077	—	8,265	1,106
Percentage of number inspected affected with disease other than Tuberculosis	72.52	1.68	36.74	13.51
TUBERCULOSIS ONLY				
Whole carcasses condemned	1	—	—	13
Carcases of which some organ or part was condemned	47	—	—	114
Percentage of number inspected affect- ed with Tuberculosis	0.84	—	—	1.52

IMPORTED MEAT CONDEMNED.

120 lbs. of Beef. 18½ lbs. of Liver.

CONGENITAL TUBERCULOSIS IN CALVES.

No cases of Congenital Tuberculosis were found on post-mortem examination of Calves at the Abattoirs.

ADMINISTRATION OF THE FOOD AND DRUGS ACTS, 1955

RELATING TO SAMPLES OF FOOD ANALYSED DURING THE YEAR, 1956

MILK.

A Formal sample of Milk, produced within the Borough, was obtained for analysis. The Analyst reported that the Milk had been deprived of 8% of its original Milk fat. This sample was taken from one churn out of a bulk consignment of 7 churns. 6 of the 7 churns of Milk were satisfactory, several having a Milk fat content of over 4%. The Food and Drugs Authority, being of the opinion that any offence there, may be in this case was of a technical nature, decided that a warning letter be sent to the producer. The farm was also visited and the producer was advised regarding the steps to be taken by him to avoid a recurrence.

ANALYSIS OF MILK SAMPLES.

No. of samples analysed	....	....	....	....	....	....	....	....	....	95
Number of samples reported genuine	....	....	....	....	....	....	....	....	....	94
Number of samples reported to be adulterated or below the legal standard	....	....	....	....	....	....	....	....	....	1
Percentage of samples adulterated or below the legal standard	....	....	....	....	....	....	....	....	....	1.05
Average percentage of fatty and non-fatty solids in total samples analysed —										
Fatty solids	....	....	....	....	....	....	....	....	....	3.78
Non-fatty solids	....	....	....	....	....	....	....	....	....	8.83
Total solids	....	....	....	....	....	....	....	....	....	12.61

SUMMARY.

No. of samples showing deficiency in milk fat	....	....	....	....	....	1
No. of samples showing added water....	....	....	....	....	....	Nil.
No. of samples of abnormal composition	....	....	....	....	....	Nil.

FOOD AND DRUGS ACT, 1955.

TOTAL NUMBER OF SAMPLES ANALYSED DURING THE YEAR ENDING 31ST DECEMBER, 1956.

No. of Samples Analysed			Description of Sample	No. of Samples Genuine			No. of Samples adulterated or not up to standard.		
Formal	Informal	Total		Formal	Informal	Total	Formal	Informal	Total
43	52	95	Milk.... ..	42	52	94	1	—	1
—	4	4	Margarine	—	4	4	—	—	—
—	1	1	Madeira Cake....	—	1	1	—	—	—
—	1	1	Irish Cherry Genoa Cake	—	1	1	—	—	—
—	1	1	Golden Butter Mints	—	1	1	—	—	—
—	1	1	Dairy Cream Toffee	—	1	1	—	—	—
—	1	1	Rum & Butter Flavour	—	—	—	—	—	—
—	—	—	Sweets	—	1	1	—	—	—
—	1	1	British Ruby Wine	—	1	1	—	—	—
—	1	1	Fish Paste Crab	—	1	1	—	—	—
—	1	1	Fish Paste Lobster	—	1	1	—	—	—
—	6	6	Ice Cream	—	6	6	—	—	—
—	6	6	Ice Lollies	—	6	6	—	—	—
—	6	6	Whiskey	—	6	6	—	—	—
—	6	6	Rum	—	6	6	—	—	—
—	1	1	Fruit Cake	—	1	1	—	—	—
43	89	132	TOTALS	42	89	131	1	—	1

SUMMARY OF FOOD DESTROYED AT THE REFUSE DESTRUCTOR
DURING 1956.

Tins of Meat	570
Tins of Fruit	1,649
Tins of Vegetable	657
Tins of Fish	154
Tins of Milk	234
Tins of Soup	87
Tins and Jars of Cream	15
Tins and Jars of Preserves	7
Tins and Jars of Lobster	1
Tins and Jars of Crab	15
Tins and Jars of Crawfish	2
Tins and Jars of Chicken	7
Tins and Jars of Puddings	7
Tins and Jars of Fish Paste	2
Tins and Jars of Pickles	6
Tins and Jars of Frozen Egg	48
Tins and Jars of Cheese Spread	54
Tins and Jars of Rice	17
Tins and Jars of Tomato Paste	2
Tins and Jars of Langouste	1
Tins and Jars of Treacle	1
Tins and Jars of Jelly	5
Tins and Jars of Golden Piccalilly	3
Tins and Jars of Chutney	6
Bottles of Salad Cream	5
Bottles of Salad Mayonnaise	1
Bottles of Beetroot	3
Bottles of Sherry	1
Packets of Cheese and Ham Spread	66
Packets of Shredded Wheat....	11
Packets of Dried Fruit	6
Packets of Raisins	6
Packets of Candied Peel	48
Sacks of Mussels	3½
Fish Cakes	132
Chicklettes	24
Fowls	4
Crumpets....	240
" Mars " Bars	31

SUMMARY OF FOOD DESTROYED—cont.

	Cwts.	Qtrs.	Lbs.
Bacon		10	15
Cooked Ham			6
Sausage		1	10
Roast Pork			3 $\frac{1}{8}$
Tongue			3 $\frac{1}{2}$
Black Puddings			6
Herrings		1	14
Cod Fillets		1	0
Kippers			7
Flour			15
New Potatoes	1	0	0
Butter			20 $\frac{1}{4}$
Cheese		1	11 $\frac{1}{2}$
Ground Almonds		1	0
Onions		2	4
Raisins....			25

DISPOSAL OF CONDEMNED FOOD.

All condemned food, including Meat from the Public Abattoirs, was disposed of by incineration at the Corporation's Refuse Destructor.

FACTORIES ACT, 1937 AND 1948.

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	40	75	Nil.	Nil.
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	217	91	1	Nil.
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	18	6	Nil.	Nil.
TOTAL	275	172	1	Nil.

2.—CASES IN WHICH DEFECTS WERE FOUND.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1.)	13	13	...	...	...
Overcrowding (S.2.)	...	...	...	...	...
Unreasonable temperature (S.3.)	...	...	...	...	...
Inadequate ventilation (S.4.)	...	...	...	...	...
Ineffective drainage of floors (S.6.)	1	1	...	...	...
Sanitary Conveniences (S.7.)	1	1	...	...	...
(a) Insufficient	34	34	...	...	...
(b) Unsuitable or defective	...	...	...	...	...
(c) Not separate for sexes	...	...	...	...	...
Other offences against the Act (not including offences relating to Outwork)	1	1	...	...	...
TOTAL	50	50	...	...	...

OUTWORK (Sections 110 and 111).

Nature of Work	Section 110			Section 111		
	No. of out-workers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing Apparel (making, etc.)	3	—	—	—	—	—
TOTAL	3	—	—	—	—	—

LOCAL HEALTH SERVICES PROVIDED UNDER THE NATIONAL HEALTH SERVICE ACTS.

GENERAL DESCRIPTION.

ADMINISTRATION.

The Medical Officer of Health acts under the direction of the Health Committee as administrative officer for the Authority's Part III Services under the National Health Service Act, 1946. He directs and co-ordinates the work of the Health Department which is discharged through specialised sections. Control and supervision over their respective sections are exercised by the Medical Officer in charge of Maternity and Child Welfare work, the Principal Dental Officer, the Superintendent Nursing Officer, the Superintendent District Nurse and the Ambulance Officer.

CO-ORDINATION AND CO-OPERATION WITH OTHER PARTS OF THE NATIONAL HEALTH SERVICE.

Interlocking membership exists between the Local Health Authority, the Hospital Management Committee and the Executive Council. In addition, the Medical Officer of Health is a member of the Hospital Management Committee, the Medical Advisory Committee, the Executive Council, the Local Medical Committee and the Area Liaison Committee. Close co-operation exists between the administrative staffs of the Health Department, the Hospitals and the Hospital Management Committee and the Executive Council. In view of the compactness of the population involved, arrangements for co-operation are developed on an ad hoc basis as required. The specific arrangements for securing co-operation in the treatment of patients at hospitals or by general practitioners are described in subsequent paragraphs and are working smoothly and efficiently.

General Practitioners are informed by letter of new services made available or of changes in existing services. Information is disseminated to the public through field workers and allied social workers, at clinics and the central Health Office, and via the agency of the Press.

JOINT USE OF STAFF.

No general practitioners are employed by the Local Health Authority. Detailed arrangements regarding joint use of staff are dealt with under Particular Services. These arrangements appertain to Tuberculosis, Orthopaedics, Obstetrics and Ophthalmics.

VOLUNTARY ORGANISATIONS.

With the exception of arrangements made for unmarried mothers none of the Authority's duties is discharged through the agency of voluntary bodies.

PARTICULAR SERVICES.

SECTION 22—CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE.

(a) EXPECTANT AND NURSING MOTHERS.

Every pregnant woman can have ante-natal care free of charge from a doctor of her choice. This service is provided under arrangements made by the Executive Council.

The Authority maintains an ante-natal clinic to which any midwife can bring her cases. The clinic, which is situated in the grounds of Risedale Maternity Hospital, is conducted by the Medical Officer for Maternity and Child Welfare, and is staffed by the Municipal Midwives. The Obstetric Consultant from Risedale Maternity Hospital is available to see abnormal cases. This arrangement provides the interchange of information necessary for the proper care and after care of expectant and nursing mothers. Each week there are three sessions, one of which is held for new cases. All new cases are routinely referred to the Pathological Laboratory for blood testing. By arrangement with the Hospital Management Committee the post-natal clinic, held in the same premises as the ante-natal, is available for midwives' cases.

Patients also receive ante-natal supervision in their own homes.

Instruction in mothercraft is conducted informally by Health Visitors and Midwives while interviewing individual expectant or nursing mothers.

No discrimination is made against the unmarried mother to whom are open all the facilities provided by the Authority. In addition, arrangements are made in suitable cases for the confinement to take place at the Maternity Home, St. Monica, Kendal, which provides for the mother's bodily needs and also gives rehabilitative training. Close co-operation is maintained with the local social worker of the Furness Association for Social and Moral Welfare and with other workers.

(b) CHILD WELFARE

The Central Clinic is staffed by a Medical Officer and two Health Visitors on each of the five afternoon sessions held every week and clerical assistance is provided.

In addition, the Mobile Clinic which is staffed by a Doctor and a District Health Visitor, operates from five different sites at each of which an afternoon clinic session is held every week. The ease with which this clinic can be attended has resulted in its considerable popularity.

Health Visitors pay a birth visit and subsequently one visit at each month until six months. Visits thereafter are of necessity less frequent, but all children are kept under supervision until they reach the age of five years. Special visits are paid as necessary.

Liaison with the Paediatric service of the Regional Hospital Board is maintained by the attendance of a Health Visitor at each out-patient session at the North Lonsdale Hospital. The Health Department can thus provide the Paediatrician with details of home background and in return gain the information necessary to undertake domiciliary supervision of specialist advice and treatment.

Children seen by Assistant Medical Officers and considered to be in need of specialist advice or treatment are sent in the first instance to their family doctors and copies of resulting hospital reports are usually given to the Health Department.

By arrangement with the Barrow Executive Council, Dr. H. C. Kodilinye, engaged by the Local Authority on a part time basis, conducts Ophthalmic Clinics held at Arndene, Abbey Road.

In conjunction with the specialist orthopaedic clinic conducted by an orthopaedic specialist employed by the Manchester Regional Hospital Board and held every six weeks at the Central Clinic, a physiotherapist devotes three sessions each week to children under five. At these sessions cases referred by the medical staff or from the orthopaedic clinic are given massage or remedial exercises. An ultra violet ray therapy clinic in charge of a physiotherapist is available at the Central Clinic for two sessions weekly to children referred by the medical staff.

(c) CARE OF PREMATURE INFANTS.

Premature babies requiring hospital treatment are dealt with at Risedale Maternity Hospital. A special heated basket for transporting the baby is loaned by the hospital and the Authority's ambulance service provides a conveyance.

The Municipal Midwives have all had instruction in the care of premature babies and any special appliances required can be borrowed from Risedale Maternity Hospital.

All Midwives are required to send notification of premature babies to the Medical Officer of Health and arrangements are made for an early follow up by the Health Visitors. This arrangement includes institutional births.

(d) WELFARE FOODS SCHEME.

A Child Welfare Shop managed by Health Department staff is situated in Duke Street.

The shop carries a large and varied stock of proprietary infant foods which are available to any mother whose baby, as shown by its weight card, regularly attends the Central Clinic and has been weighed within the last four weeks. In addition National Dried Milk, Cod Liver Oil, Orange Juice and Vitamin A and D Tablets are supplied to eligible persons.

(e) DENTAL CARE

The Dental Clinic is situated in the same premises as the Central Clinic. Approximately one and a half sessions per week are devoted to the dental care of expectant and nursing mothers and children under five. This service is all that is necessary at the present time to meet the demands made upon it.

(f) OTHER PROVISION.

Close co-operation exists between the Health Department and the various other workers in the field of Children's Welfare, in particular the Local Inspector of the N.S.P.C.C., the Probation Officers, the Area Children's Officer and the Diocesan Social Worker.

No Adoption Society is located in Barrow but the Health Department maintains contact and works with the Children's Department, which notifies to the Medical Officer of Health the names and addresses of potential adopters, so that visits by a Health Visitor can be arranged and the suitability of conditions assessed. Close supervision is maintained during the trial period before confirmation of the Adoption Order.

Child Life Protection is the responsibility of the Children's Committee but foster children are supervised by the Health Visitors in the normal course of their duties.

SECTION 23—DOMICILIARY MIDWIFERY.

There is a present working establishment of 7 midwives controlled by the Superintendent Nursing Officer. The Local Health Authority is the Local Supervising Authority under the Midwives Acts and a Medical Officer is deputed to act as Medical Supervisor of Midwives, non medical supervision being carried out by the Superintendent Nursing Officer, in this connection, visits being made to the Authority's domiciliary and to private midwives alike.

A Minnitt's Gas-Air Analgesia Apparatus is available for each midwife. Any patient medically suitable can have this aid. Arrangements for conveyance of the apparatus are made in each case. A sterilised accouchement set is provided free for each patient.

Where the patient is unsuitable on medical grounds or because of unsuitable home conditions for a domiciliary confinement, it is usually possible to arrange for a hospital confinement. The midwives are available to act as maternity nurses where a patient wishes to be confined by her own doctor.

The Authority regularly sends midwives for a refresher course but has no arrangements for training pupil midwives as no Part II Training School exists in the Borough.

SECTION 24—HEALTH VISITING.

The Superintendent Nursing Officer is in charge of the establishment of 10 Health Visitors. In addition to visiting routinely expectant and nursing mothers and young children, the Health Visitors call upon children under five who have been notified as cases of pneumonia, measles or whooping cough. Frequent visits are made in cases of a miscellaneous nature especially in regard to the aged. The work of prevention, care and after care is performed by all Health Visitors and additionally one of them devotes her whole visiting time to this work in connection with the tuberculous population and their households. This nurse also assists at the local Chest Clinic of the Regional Hospital Board.

Each year some of the Health Visitors attend refresher courses arranged by recognised national organisations, each Health Visitor receiving this training at least once every five years.

The Local Authority has a scheme of assisted training for suitable nurses desiring to obtain the Health Visitor's Certificate.

SECTION 25—HOME NURSING.

The existing establishment of 12 District Nurses including the Superintendent District Nurse is maintained by the employment of part-time staff but most of the Home Nurses are full-time. The Superintendent has her headquarters at the Home at 2, Fairfield Lane, where most of the resident staff are located. There is also a two-nurse Home at 27, Mikasa Street, Walney. Nine cars are available for use and staff for whom no car is available walk or cycle.

The services of a Home Nurse are provided on medical recommendation only. The nurse co-operating with the general practitioner makes a morning visit as often as the condition of the case demands and in severe cases evening visits are also paid. There is no night nurse.

The main types of cases dealt with were medical (76%), surgical (17%), and others (notably gynaecological and tubercular).

A fair amount of time is devoted to giving injections, notably anti-biotics, and during the year 15,204 (41% of the total) visits were made for this purpose. This is in addition to the administration of streptomycin at the Devonshire Road Chest Clinic on two half days a week. Although there is no special provision for the home nursing of sick children, 1,299 (3.6% of the total) visits were made to children under 5 years of age.

Each year provision is made for District Nurses as necessary to attend residential refresher courses arranged by the Queen's Institute or other recognised authorities, the arrangement being such that each nurse receives this training at least once every five years.

The Local Authority has accepted a scheme whereby certain State Registered Nurses are nominated for Queen's training at approved training centres.

SECTION 26—VACCINATION AND IMMUNISATION.

The Local Health Authority provides facilities for immunisation against diphtheria and whooping cough and for vaccination against smallpox. Although the arrangements are on a voluntary basis parents are constantly encouraged by Health Visitors in the clinic and home to take advantage of these facilities. Organised effort is made to give each child primarily immunised a re-inforcing prophylactic injection at the age of five.

General practitioners who participate in the arrangements undertake vaccination and immunisation in their surgeries or in the home.

At the Central Clinic two sessions each week are devoted exclusively to vaccination and immunisation. An assistant Medical Officer and a Health Visitor are on duty and clerical assistance is provided. Cases receive attention with or without appointment.

SECTION 27—AMBULANCE SERVICE.

The Chief Fire Officer acts as Ambulance Officer and is in charge of a fleet of 5 ambulances and one sitting case car, 3 of the ambulances being fitted with radio telephones. The ambulance can be summoned for removals by doctors, nurses and midwives, but a medical certificate is required before an out of town journey is authorised. Abuse of the service is rare and is limited as much as possible by close supervision of calls.

SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER CARE. TUBERCULOSIS.

Provision of advice and assistance, nursing requisites, home visiting and co-operation with Industrial Medical Officers, Disablement Rehabilitation Officers and the National Assistance Board's Officers has continued throughout the year. As the Tuberculosis Health Visitor acts as clinic nurse there has been no difficulty in maintaining adequate liaison.

Arrangements exist for the protection of suitable contacts of tuberculous cases with B.C.G. vaccine. As mentioned previously B.C.G. vaccination is offered to children aged 13 years.

OTHER ILLNESS.

The Health Visitors advise and assist in cases referred by hospitals and general practitioners. Residential accommodation is provided by arrangement with the Governors of Infield Convalescent Home.

LOAN CUPBOARDS.

This service is available to all bed patients nursed at home and sick room equipment such as bed pans, bed rests, fracture cages, rubber sheeting, air rings, may be loaned in any case where need exists. A limited number of wheel chairs for convalescent patients is also available. Applications are received at the Nurses' Home.

GENERAL.

The services of Domestic Helps and District Nurses are provided in suitable cases.

HEALTH EDUCATION.

In addition to verbal instruction and advice given by the staff suitable posters are displayed in places frequented by the public. Campaigns are conducted in schools and at clinics. Student Nurses are given every opportunity to see the Local Health Authority services in action.

The local press co-operates in publishing items to which it is considered the public attention should be drawn. Notifications are received from the local general hospital of admissions of cases of burns and scalds. Such cases under the age of five are visited in their own homes by Health Visitors.

During November a one-day In-Service Training Course was arranged by the Central Council for Health Education. This was given on two successive days and by a re-arrangement of duties, it was found possible for all the staff of the Health Department to attend. Two evening lectures were also arranged, one for Members of the Council and the other for Domestic Helps.

SECTION 29—DOMESTIC HELP.

The Superintendent Nursing Officer and Health Visitors undertake most of the field work in connection with the service. Helps are provided mainly in cases of confinement, illness of housewife or to infirm old people, but applications are occasionally received from other categories of person whose cases, on investigation, are found to come within the scope of the scheme. This is not a free service and charges are recovered according to the means of the applicant.

The names of persons suitable for this kind of work are registered and listed. Helps are allocated to cases as applications are received. This system works satisfactorily and it has not been found necessary to pay a retaining fee, as cases can usually be arranged so that helps have very little idle time.

SECTION 51—MENTAL HEALTH.

ADMINISTRATION.

COMMITTEE. The Health Committee, which comprises Council Members and co-opted representatives of the local medical profession, meets at monthly intervals to deal with matters affecting Mental Health.

STAFF. This section of the Department is staffed by two male Duly Authorised Officers. Administration and clerical duties are undertaken by the general office staff. The Assistant Medical Officers provide the medical assistance needed, and it is also possible to have assistance in certification from local practitioners. The visiting specialists from Lancaster Moor Hospital conduct a weekly out-patient clinic and in addition are available for consultation as required.

CO-ORDINATION. The Authority's Officers undertake the supervision of and reporting on cases on trial for licence or on licence and in addition prepare any other reports of home conditions, etc., required by Hospitals and Institutions.

VOLUNTARY ORGANISATIONS. There are no voluntary organisations dealing with mental health in the area.

TRAINING OF STAFF. Duly Authorised Officers attend a training course when required.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

PREVENTION, CARE AND AFTER CARE. All Health Visitors are alive to the special problems presented by the mentally ill and in the course of their duties give appropriate advice to those threatened with, suffering from, or recovering from mental illness. They refer details to the Mental Health section when necessary. They also advise those having custody of defective children. Concurrently the Authority's Medical and Lay Visiting Officers maintain supervision over cases under domiciliary care or on licence. Appropriate advice and assistance is given and arrangements are made for financial assistance to be granted by the National Assistance Board where applicable. New cases coming to the notice of the Authority's staff are immediately referred for specialist advice so that the condition may be dealt with in its early stages.

LUNACY AND MENTAL TREATMENT ACTS, 1890—1930. The Manchester Regional Hospital Board prohibits the admission of cases direct to Roose Hospital which is considered to be an annexe to Lancaster Moor Hospital. All cases are removed to Lancaster nearly 50 miles away in the first instance and this imposes a burden both on the Duly Authorised Officers and on the Ambulance Service.

Under the Lunacy Act, 1890, the Duly Authorised Officers issue three day orders, detaining persons of unsound mind in hospital, prepare summary reception orders and remove patients to mental hospitals. In addition the Duly Authorised Officers assist with arrangements for the treatment of voluntary and temporary patients. Case histories and reports on home conditions are prepared for the hospitals. Cases on licence etc., are supervised.

MENTAL DEFICIENCY ACTS, 1913—1938. Through the agency of the Duly Authorised Officers, field workers of the Health Department and of other social services and general practitioners, suspect mental defectives are brought to the notice of the Department. The majority of cases ascertained to be mental defectives are however reported by the Local Education Authority under Section 57 Education Act, 1944. Mental defectives receive statutory or voluntary supervision in their own homes and are visited routinely by a Duly Authorised Officer and an Assistant Medical Officer. Guardianship cases are similarly supervised. Suitable cases are placed on the waiting list for institutions.

The promise of an early start to the provision of an Occupation Centre fore shadowed last year, will be welcomed by all concerned with the welfare of the children and young people who are unfortunately debarred, through mental retardation, from attending school and will fill a long-felt want, not only enabling the children to lead a happier, fuller life and receive suitable training, but also relieving parents, for an appreciable part of the day, of the onerous and trying task of constant supervision.

AMBULANCE SERVICE. The general ambulance service is available for mental cases. Where necessary, one of the Authority's Duly Authorised Officers travels with the ambulance or car, and arrangements exist whereby mental nurses can be borrowed from Roose Hospital to accompany female or difficult patients.

HEALTH CENTRES.

No proposals for the provision of Health Centres have been made and in Barrow there is no demand for the comprehensive centre envisaged by the Act.

CARE OF MOTHERS AND YOUNG CHILDREN.

WELFARE CENTRE.

There has been a slight increase in the Birth Rate.

402 babies under 12 months and 73 older children were admitted to the register; whilst of the cases on the register, 4,663 attendances were made by the babies, 543 attendances were made by the one year olds and 810 attendances were made by children between the ages of 2 and 5 years.

MOBILE CLINIC

In addition to the foregoing, 380 babies under 12 months and 48 older children were admitted to the register at the Mobile Clinic during the year, and at that clinic 5,394 attendances were made by the babies, 503 attendances were made by the one year olds and 532 attendances were made by children between the ages of 2 and 5 years.

PREMATURE BABIES

During the year 83 premature babies were born alive, including 56 whose mothers usually reside within the area. 12 were born at home, 6 were retained at home and all survived. The remaining 6 were transferred to hospital and 4 survived. Of the 71 born in hospital 6 died in the first 24 hours, 9 more died before the month end and the remaining 56 survived.

PREMATURE BIRTHS.

	Died in 24 hours.	Died 1 day—Survived 1 month. 1 month.		Total.
Born at home and retained at home	—	—	6	6
Born at home and transferred to Hospital	—	2	4	6
Born in Hospital	6	9	56	71
Total	6	11	66	83
No. whose mothers usually reside in area				56

INFANT MORTALITY.

The Infant Mortality Rate figures since 1950 are :—

	Unadjusted	Adjusted for Inward and Outward Transfers
1950	45.20	39.24
1951	35.56	35.00
1952	37.83	37.78
1953	29.87	27.82
1954	29.34	22.40
1955	31.02	28.62
1956	33.19	28.51

The 39 deaths occurring during 1956 are summarised as follows :—

Diseases of the Nervous System and Sense Organs	2
Diseases of the Respiratory System	7
Diseases of the Digestive System	2
Congenital Malformation	9
Other Diseases of early infancy	19

HEALTH VISITING.

The following table shows the work done in connection with mothers and children :—

(i) To expectant mothers	First visits	420
	Total visits	576
(ii) To children under 1 year of age	First visits	967
	Total visits	8445
(iii) To children between 1 and 2 years of age	Total visits	4073
(iv) To children between 2 and 5 years of age	Total visits	6502

CARE OF UNMARRIED MOTHERS.

During the year 6 cases were admitted to St. Monica.

OPHTHALMIC TREATMENT

39 children made 70 attendances and spectacles were prescribed in 17 cases.

The following is a classification of the conditions for which children attended the clinic :—

Refractions—

Hypermetropic Astigmatism	1
Hypermetropia	1
Mixed Astigmatism	1
Mixed Astigmatism with Epicanthus	1
Hydrocephalus	1

Squints—

Convergent	8
Alternating	6
Various	5

Treatments—

Phlyctenular Ophthalmia	1
Right Epicanthus	1
Left Epicanthus	1
Prematurity	1
Congenital Nystagmus	1
Congenital Impatency of Lachrymal Ducts (Bilateral)	6
Congenital Impatency of Lachrymal Ducts (Right)	4

DENTAL TREATMENT.

During the year 59 sessions were devoted to the treatment of expectant and nursing mothers and children under 5. 233 attendances were made by expectant and nursing mothers and 442 by children under 5.

The Council has no workshop for producing dentures, but the work is carried out by local mechanics.

Facilities for X-ray are available at North Lonsdale Hospital.

The following tables show the work done :—

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	65	65	52	57
Children under 5	267	256	251	251

	Scal-ings and Gum treat-ment	Fill-ings	Silver Nit-rate treat-ment	Ex-trac-tions	Gen-eral An-aesth-etics	Dentures Provided		X-Rays
						Full Upper or Lower	Par-tial Upper or Lower	
Expectant and Nursing Mothers	29	91	....	157	3	10	9	....
Children under 5	2	26	136	336	110	....	....	....

ORTHOPAEDIC CLINIC.

75 children made 139 attendances on the 9 occasions on which the clinic was held.

50 children visited the Physiotherapist on 505 occasions for fitting of splints, plasters, etc.

MASSAGE AND REMEDIAL EXERCISES CLINICS.

94 patients attended for massage and made 1033 attendances.

64 patients had remedial exercises in 282 attendances.

SUN RAY.

During the year 15 children under 5 made 152 attendances.

ANTE-NATAL CLINIC.

89 patients made 381 attendances in the year.

MIDWIFERY.

MUNICIPAL MIDWIVES.

It has been possible to maintain the number of staff at an adequate level to meet the demands of the service.

303 deliveries were attended by Midwives as follows :—

Municipal—Midwives cases	51	} 303
Maternity Nurses cases	....	....	....	....	....	252
Gas-Air administered	....	....	....	....	....	256

SUPERVISION OF MIDWIVES.

The Medical Officer deputed to act as Supervisor of Midwives paid 20 visits in this connection. There were no irregularities necessitating proceedings.

Medical Aid was summoned in accordance with the rules of the Central Midwives Board in 26 cases. 9 of these were cases who had booked a General Practitioner Obstetrician under arrangements of the Barrow Executive Council.

HOME NURSING

36,256 visits were paid to 1,704 patients.

VACCINATION AND IMMUNISATION.

During the year, 279 persons have been vaccinated and 23 have been re-vaccinated under clinic arrangements. A further 148 vaccinations and 15 re-vaccinations have been reported by general practitioners.

No case of smallpox has been reported.

10 courses of immunisation against Diphtheria and 121 re-inforcing doses were administered at the clinic and 4 courses of immunisation and 17 re-inforcing doses were reported by general practitioners.

11 whooping cough immunisations and 4 re-inforcing doses were completed at the clinic.

325 combined diphtheria and whooping cough immunisations and 80 re-inforcing doses were completed at the clinic and 165 combined diphtheria and whooping cough immunisations and 14 re-inforcing doses were reported by general practitioners.

No case of diphtheria occurred.

43.73% of the population under 5 and 17.90% of those from 5 to 14 years are estimated to have maximum immunity against diphtheria. A further 54.37% of these older children have been immunised but have not had their immunity strengthened by the administration of a re-inforcing injection.

AMBULANCE.

The ambulance fleet comprises a Morris (1955), a Commer (1955), a Commer (1951), a Daimler (1950), a Bedford (1942) and an Austin car (1955).

During the year 14,193 calls were answered involving a mileage of 82,059.

PREVENTION OF ILLNESS, CARE AND AFTER CARE

TUBERCULOSIS

The general arrangements for tuberculosis prevention and care to which reference has already been made, remained unchanged during the year.

The Tuberculosis Health Visitor, in her dual role as clinic nurse to the Chest Physician, has every opportunity of ascertaining contacts of known cases and in all 175 contacts were examined at the Chest Clinic arising out of 51 new notified cases.

Information concerning deaths from unnotified tuberculous disease is given to the Tuberculosis Health Visitor who immediately ascertains contacts of the deceased.

Close co-operation between the Ministry of Labour, Industrial Medical Officers, the Chest Physician and the Health Department has facilitated the resettlement of patients in employment and the obtainment of suitable work and at the end of the year 12 tuberculous persons (7 male, 5 female) out of a total of 66 (53 male, 13 female) on the Disabled Persons Register were unemployed.

There are no vocational training schemes operating in Barrow and great difficulty is experienced in getting patients to travel outside the area in order to attend. Similar difficulty arises when trying to place patients in employment outside the town.

DOMESTIC HELP.

381 cases were dealt with and 95 helps were in employment at the year end.

MENTAL HEALTH.

The following summary indicates work done by the Duly Authorised Officers.

SECTION 20, LUNACY ACT, 1890. 3 male patients were removed to Roose Hospital on "three day" orders. A Summary Reception Order was prepared for one of these patients who remained in Roose, a second was transferred to Lancaster Moor Hospital as a voluntary patient and the third was released.

40 patients (26 male and 14 female) were removed to Lancaster Moor Hospital on "three day" orders. Summary Reception Orders were issued by Magistrates for that area in respect of 4 males and 3 females included in that number. 18 males and 9 females became voluntary patients. 2 males and 1 female were released, 1 female died and further action on the remaining 2 male patients had not been taken at the end of the year.

OTHER REMOVALS. In addition to the cases listed above, 117 cases who had not been the subject of a Section 20 Order were admitted to hospital. They comprised 7 males and 2 females who would previously have been admitted to Roose Hospital for certification but who were dealt with in their own homes and removed to Lancaster Moor Hospital on Summary Reception Orders, 50 voluntary males and 55 voluntary females, and 1 male and 2 female temporary patients (Section 5). Officers of the Authority escorted all the cases admitted under Orders and 49 of the 105 voluntary patients.

In all 102 journeys to Lancaster were made.

OTHER WORK. Case histories were prepared in respect of 17 cases.

Home conditions reports were submitted in respect of 6 proposed discharges and 6 reports were prepared on cases released or on trial.

MENTAL DEFICIENCY. 7 males and 4 females were reported by the Local Education Authority under Section 57(5), Education Act, 1944. They were all placed under statutory supervision.

The following table shows the disposal of ascertained defectives as at the year end together with details of the waiting list for institutional care at the same date.

				Under 16 years		16 and over	
				Male	Female	Male	Female
Under Statutory Supervision	....			11	10	49	37
Under Guardianship	....	....	....	—	—	—	—
In Place of Safety	....	....	....	1	—	—	—
In Hospitals	....	....	....	5	1	52	52
Under Voluntary Supervision	....			1	—	3	11
Included in the above, but awaiting institutional vacancies	....	....		2	2	1	2

NATIONAL ASSISTANCE ACT, 1948.

No action under Section 47 of this Act was taken during the year.

EPILEPTICS AND SPASTICS

As Epilepsy and Cerebral Palsy are not notifiable and as the only Health Department records kept of cases occurring in the Borough are those of the Health Visiting Staff, no accurate assessment can be made of the total incidence of these conditions. Several departments offer special facilities according to the severity of the condition.

The Welfare Department has a scheme to cover handicapped persons generally. The Orthopaedic Clinic and the local office of the Ministry of Labour know of additional cases.

School children are dealt with as necessary through the School Health Service and Handicapped Pupils Regulations, 1953. In the case of epileptics and spastics not requiring special educational treatment, adequate facilities are available through the diagnostic and treatment services.

CIRCULAR 1/54—PARAGRAPH 5

There were 21 Forms B.D.8. received during the year. No case of retrolental fibroplasia was reported in a premature infant.

FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS
1ST JANUARY—31ST DECEMBER, 1956

(i) Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8. recommends :—	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	7	—	—	4
(b) Treatment (medical surgical or optical)	6	2	—	2
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	2	2	—	—

OPHTHALMIA NEONATORUM

There were no cases of Ophthalmia Neonatorum notified during the year.

HEALTH OF CHILDREN

Consideration was given by the Health Committee to Ministry of Health Circular 27/54 on the prevention of the break-up of families. The existing and ever increasing Domestic Help Service enables children to live at home during the illness of a parent or guardian. The inauguration of a Night Sitter-in Service completed round the clock assistance during such domestic crises and offered care to the aged and infirm. The new service is an emergency one and so far there has been little demand for it, which is fortunate as recruits are not easily found.

The children of problem families are exposed to physical neglect and mental retardation but receive particular attention from the Health Visitor who endeavours to seek a solution to the family failure by obtaining, if necessary, the help of others, such as a mental health worker, a domestic help, or a voluntary organisation.

The Health Visitor is both receiver and giver of a two-way system of information concerning the prevention of break-up of families. Her colleagues in this field are many and include the family doctor, home nurse, school nurse, welfare worker, housing manager, N.S.P.C.C. Inspector, the social and moral welfare worker, and bodies such as the Children's Department and the National Assistance Board.

Lastly the Medical Officer of Health is co-ordinator of the local statutory and voluntary services which are concerned with the welfare of children in their own homes.

